



Office of the President

## Memorandum

**Date:** February 17, 2015

**cc:** Cabinet  
Darwin Labordo  
Jonna J. Lewis  
(all w/ attachments)

**To:** Dr. Rebecca Gutierrez Keeton  
Vice President for Student Affairs

**From:**

  
\_\_\_\_\_  
Dr. Soraya M. Coley  
President

**Subject:** Delegation of Authority – EXECUTIVE ORDER NO. 1053  
Policy on Student Mental Health

Pursuant to Executive Order No. 1053, I am delegating to the Vice President for Student Affairs, the authority to implement and exercise the provisions of said Executive Order subject to the conditions expressed therein. You may sub-delegate this authority as you see appropriate.

(w/attachments)

THE CALIFORNIA STATE UNIVERSITY  
OFFICE OF THE CHANCELLOR



BAKERSFIELD

CHANNEL ISLANDS

December 6, 2010

CHICO

DOMINGUEZ HILLS

**MEMORANDUM**

EAST BAY

**TO:** CSU Presidents

FRESNO

**FROM:** Charles B. Reed  
Chancellor

FULLERTON

HUMBOLDT

**SUBJECT:** Policy on Student Mental Health - Executive Order No. 1053

LONG BEACH

Attached is a copy of Executive Order No. 1053, Policy on Student Mental Health, which develops and communicates systemwide policies, procedures, and/or guidelines for mental health services to matriculated students.

LOS ANGELES

MARITIME ACADEMY

In accordance with policy of the California State University, the campus president has the responsibility for implementing executive orders where applicable and for maintaining the campus repository and index for all executive orders.

MONTEREY BAY

NORTHRIDGE

POMONA

Questions regarding this executive order may be addressed to Mr. Ray Murillo, Associate Director, Student Programs, Academic Affairs, Student Academic Support, at (562) 951-4707 or [rmurillo@calstate.edu](mailto:rmurillo@calstate.edu).

SACRAMENTO

SAN BERNARDINO

CBR/rm

SAN DIEGO

Attachment

SAN FRANCISCO

c: CSU Provosts/Vice Presidents for Academic Affairs  
CSU Vice Presidents for Student Affairs  
CSU Counseling and Psychological Services Center Directors  
CSU Student Health Center Directors  
Executive Staff, CSU Office of the Chancellor

SAN JOSÉ

SAN LUIS OBISPO

SAN MARCOS

SONOMA

STANISLAUS

**THE CALIFORNIA STATE UNIVERSITY  
Office of the Chancellor  
401 Golden Shore  
Long Beach, California 90802-4210  
(562) 951-4707**

**Executive Order: 1053**

**Effective Date:** December 6, 2010

**Supersedes:** No Prior Executive Order

**Title:** Policy on Student Mental Health

This executive order develops and communicates systemwide policies, procedures, and/or guidelines for mental health services to matriculated students.

**I. Purpose**

This policy governs the provision of mental health services to matriculated students in the California State University (CSU) System. Regardless of where or how these services are provided, the provision of services must comply with the policies contained in this executive order (EO). Each campus' president or designee shall ensure appropriate oversight of all university mental health services. Student mental health services shall be established and maintained to enhance the academic performance of matriculated students and to facilitate their retention in state-supported programs of the university. These services shall include accessible, professional mental health care; counseling, outreach and consultation programs; and educational programs and services.

**II. Required Basic Services**

Though a common core of basic mental health services shall be provided to students throughout the CSU, there may be some variance beyond the basic services on individual campuses due to the availability of personnel, facilities, and other resources. At a minimum, CSU campuses shall offer the following basic services:

**A. Counseling/Psychotherapy**

Campuses shall offer short-term individual and group counseling/therapy services that are responsive to the diverse population of currently enrolled students experiencing the types of psychological or behavioral difficulties that limit their academic success. Individual, couples, and/or group counseling/therapy shall be available to students for educational, personal, developmental and relationship issues.

Most students in need of individual counseling are able to effectively deal with their concerns within a relatively brief period. While some students have need for extensive counseling services, CSU campuses may limit the number of sessions students can utilize to maximize student access to services. [Also, see II.F. (Referral Resources) and III.B. (Continued Care) for additional information.]

**B. Suicide and Personal Violence Services**

Each campus shall develop a protocol for immediate response to suicidal and violent behavior. The protocol shall cover a continuum of services for students, families, and the campus community spanning from identification of suicide, or violence towards others through the loss and grieving process.

**C. Emergency/Crisis Services**

Campuses shall develop protocols for addressing mental health crises that occur during Counseling Center hours of operation as well as protocols for crises after its regular business hours.

**D. Outreach**

Campuses shall provide psycho-educational workshops, programs and services that address critical student issues as well as prevention and wellness programs. Programs must be responsive to the diversity of the CSU student population and enhance the ability of students to develop healthy and effective styles of living and learning.

**E. Mental Health Consultation**

Mental health professionals may provide consultative services to members of the university community regarding student mental health issues. As part of this consultation service, mental health professionals should identify and address real, perceived, and potential issues that may impede students' academic progress or success.

1. Mental health professionals may provide consultation regarding students (within professional, legal, and ethical boundaries) to faculty and staff who request such assistance.
2. Mental health professionals may provide consultation regarding students (within professional, legal, and ethical boundaries) to a student's parents, spouse, concerned friends, and other agents who are assisting with student care.

**F. Referral Resources**

Mental health professionals should identify appropriate referrals both within the institution and the local community to assist students whose problems are outside the scope of the campus' basic mental health services. When clinically indicated, mental health professionals should also make an effort to ensure that students follow up on those referrals.

### III. Delivery of Basic Services

#### A. Funding of Basic Services

1. State Appropriations—campuses may use state appropriations to provide basic services.
2. Mandatory Fee—campuses may assess all students a mandatory student fee to provide basic services.
  - a. Campuses are authorized to establish a Category II mandatory campus-based fee for Mental Health Services or to increase an existing Health Services fee by a specific amount to be dedicated to Mental Health Services. The new Mental Health Services fee rate, or a rate increase to the Student Health Services Fee for mental health services, must be based on the actual cost to provide the services described in this executive order (section II – Required Basic Services). Revenue and expenditure plans for the Mental Health Services Fee or a rate increase to the Student Health Services Fee for mental health services should be reviewed in accord with the California State University student fee policy, described in a separate executive order.
  - b. Additional fees (e.g., a per visit charge) for basic services may not be charged.
  - c. The revenue from the Mental Health Services Fee or a rate increase to the Student Health Services Fee for mental health services shall be dedicated to support mental health services operations.
  - d. The campus president or designee may establish campus-based procedures for waiving mandatory mental health services fees in exceptional circumstances. [e.g., high school students in special programs (EO-461), individuals participating in established fee waiver for California residents 60 years of age or older (EO-734), etc.].
  - e. Adjustment of fees is subject to the California State University’s student fee policy, described in a separate executive order.

#### B. Continued Care

Campuses shall develop written protocols (within professional, legal, and ethical boundaries) that may authorize continued care to a student who has become ineligible for services but for whom termination of care would present significant risks. Continued care may be provided only until the student can be referred to community resources for appropriate care. Refusal to accept a referral is not sufficient reason to continue care.

#### C. Denial of Care

Campuses shall develop written protocols (within professional, legal, and ethical boundaries) that may authorize denial of services or care to a student. For example, students who are disruptive, refuse to follow treatment recommendations, abuse or

misuse prescribed medications, or have treatment needs that exceed the scope of services available on campus may be denied care.

#### **IV. Augmented Services**

Campuses may offer augmented mental health services beyond the scope of basic services. The student, not the university, is financially responsible to the provider for all mental health services received off campus and for services received on campus but beyond the scope of authorized basic services.

A. The augmented services a campus may offer include but are not limited to the following:

1. Specialty care appropriate to the mental health needs of students.
2. Services to partners or family members of eligible students.
3. Services to students of non-state-supported programs of the university, such as those offered through continuing education.

B. Conditions for Approval of Augmented Services

The president or designee is delegated the authority to approve augmented services such as those listed above subject to all of the following conditions:

1. The service is provided in a manner that is consistent with CSU mental health policy and it does not prevent the adequate provision of basic mental health services.
2. The mental health service or contractor is qualified and equipped to provide the service.
3. Justification of student need or demand for the service has been made.
4. The augmented service is effective in terms of both treatment and cost.
5. The proposed service has been reviewed by the student advisory committee (if available), prior to review by the campus president or designee.

C. Funding of Augmented Services

1. An augmented service may be supported by user fees.
2. The user fees collected for augmented service shall be kept separate from those collected from any mandatory fee for basic mental health services.
3. The fees for an augmented service shall not exceed the actual cost of providing the services and/or materials.
4. The revenue from fees for an augmented service shall be dedicated to support mental health services operations.
5. The establishment and changing of augmented mental health services fees are subject to the California State University's student fee policy that is described in a separate executive order.

**V. Training Programs**

Campuses may provide practicum, internship, and postdoctoral training programs. Mental health training programs shall serve first and foremost as a mechanism to provide additional mental health services for students. Such programs shall be periodically evaluated to assess the adequacy of services provided by trainees and the cost/benefit of the program (comparing direct program costs with the cost of the clinical time lost to administer and supervise the programs).

- A. Training programs shall have detailed policies and procedures that minimally fulfill the requirements of the organizations through which interns are selected (e.g., the American Psychological Association or Association of Psychology Postdoctoral and Internship Centers). If trainees are selected from on-campus programs or sources other than clearinghouses, then policies and procedures equivalent to those of the clearinghouse should be in place.
- B. The training program shall be administered by a qualified, licensed professional in the appropriate discipline.
- C. Trainees shall be selected, trained, supervised and evaluated by licensed mental health professionals. Trainees must have access to a licensed supervisor whenever they are providing services.
- D. All supervisors must abide by laws and ethical guidelines related to trainees, including but not limited to those related to the amount of time spent on supervision and the nature of the supervisor-supervisee relationship.
- E. All trainees must adhere to organizational policies, laws and professional ethics.
- F. Students assigned to trainees shall be specifically informed of the status of their clinician and, whenever feasible, given the opportunity to choose a licensed professional over the trainee.
- G. A written evaluation process that provides comprehensive evaluative feedback to trainees shall be undertaken at least twice during the training year.

**VI. Expectations and Qualifications of Mental Health Professionals at CSU Campuses**

**A. Mental Health Clinicians**

- 1. The CSU expects that mental health clinicians shall spend at least 60% to 65% of their base time providing direct services, which for the purposes of this recommendation, shall include individual/group counseling, intakes, assessment, crisis intervention, and other clinical services assigned.

## Executive Order 1053

Although these recommendations establish a baseline or benchmark, adjustments to a mental health clinician's direct clinical service expectations may be necessary to accommodate additional responsibilities, assignments, and the academic calendar.

These recommendations are not meant to supersede the terms of any collective bargaining agreement.

2. The CSU Classification and Qualification Standards, state law (as it relates to mental health clinicians), and the collective bargaining agreement will guide the determination of mental health clinician qualifications.
3. All mental health clinicians must adhere to the ethical principles of their respective disciplines, including but not limited to the standards set forth by the American Psychological Association, the American Association of Marriage and Family Therapists, the National Association of Social Workers, or the American Counseling Association.
4. All mental health clinicians who are currently licensed shall maintain their license. Those hired after July 1, 2011 in the classification of SSP-AR must be either currently licensed in California or if unlicensed must be licensed within 24 months of their first employment. If licensed within another state, they shall obtain licensure in California within one year. Those who are unlicensed or possess a license within another state may provide care during the interim period of obtaining a license. Campuses shall develop protocols for routinely checking the licensure status and disciplinary actions for each mental health clinician through querying state license boards and where appropriate, the National Practitioner Data Bank/Health Care Integrity and Protection Data Bank.
5. Mental health clinicians shall provide documentation that they have received appropriate formal training, including relevant graduate course work and supervised experience. Their formal training should include course work, experience and/or training in psychopathology, multicultural counseling, and legal and ethical issues related to the provision of mental health services. Clinicians who provide training and supervision must have a doctorate or an appropriate master's degree and experience. In addition, any continuing education requirements required for supervision must be met.
6. Both at the time of hire and throughout their employment mental health clinicians shall demonstrate:
  - a. Knowledge, skills, and abilities in working with students of diverse backgrounds.
  - b. A thorough understanding of normative developmental issues faced by university students of various ages. Clinicians should also demonstrate the ability to work with students presenting with a wide variety of concerns.
  - c. A competency in providing individual and group therapy, crisis intervention, outreach and consultation, and program development. To effectively carry out these duties, mental health providers must demonstrate an ability to communicate effectively with a wide-range of students, faculty, staff, and administrators.



- d. An interest to remain current in research, in particular, outcome-based assessment.

**B. Trainees**

1. For campuses with training programs, professional ethics and state statutes mandate that licensed staff members select, supervise, and evaluate trainees, thereby assuring quality service to students and minimizing campus risk.
2. Trainees shall demonstrate appropriate qualifications and experience, and shall be trained and supervised by professional staff members holding the appropriate educational credentials.
3. Trainees must be able to perform duties appropriate to their level of experience, professional preparation, and training under close supervision by qualified professionals.
4. Trainees shall strive to develop and subsequently demonstrate knowledge, skills, and abilities in working with university students of diverse backgrounds.

**C. Psychiatrists**

Psychiatrists shall meet all requirements set forth in the Union of American Physicians and Dentists (UAPD) collective bargaining agreement and those set forth in Executive Order 943 or its successor.

**D. Other Client Service Personnel**

Other personnel who have client care responsibilities (e.g., case managers) shall have qualifications that meet community standards for such positions.

**VII. Program Evaluation**

**A. Internal Program Evaluation and Review**

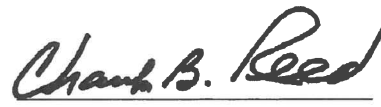
CSU mental health services shall undergo regular reviews as part of an ongoing assessment program directed toward program improvement. Starting in 2011-12, mental health services will participate in biennial common data collection determined by the Mental Health Services Committee, a CSU systemwide advisory committee, who will solicit input from CSU mental health services directors.

**B. External Program Review**

Each campus mental health service program shall undergo regular external review at least every five years. This can be accomplished by maintaining accreditation by the International Association of Counseling Services (IACS), Accreditation Association of Ambulatory Health Care (AAAHC), or another external accrediting group. Alternatively, an external review may be conducted using applicable standards set by a professional organization such as the Council for the Advancement of Standards in Higher Education (CAS) or another relevant professional organization. The first round of external reviews should be completed by December 2013.

**VIII. Mental Health Records**

- A. Mental Health records shall be secured in compliance with state and federal laws. The records shall also conform to standards of practice set by appropriate professional bodies.
- B. Only persons authorized by the mental health services manager may gain access to mental health records in accordance with state and federal law.
- C. The mental health record shall meet state requirements and shall document:
  - 1. A consent to treat
  - 2. All exams, diagnoses, services, and follow up, indicating the date, name of the student, name of the provider(s), and a description of the service
  - 3. All referrals
  - 4. All correspondence
  - 5. All legal documents, including release of information forms
- D. All electronic information data should be securely backed up in off-site locations.
- E. Confidentiality of all mental health information shall be maintained in accordance with applicable state and federal laws.

  
Charles B. Reed, Chancellor

Dated: December 6, 2010